FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION FOF WE Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0076 May 31, 2005 Expires:

FORM D

Estimated average burden JAN 2 0 2004 hours per response.....16.00

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. D. **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

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DATE R	ECEIVED
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Filing Under (Check box(es) that apply): R Type of Filing: New Filing Amendme	ule 504	☐ uroe			
	A. BASIC IDENTIFICATION DATA				
1. Enter the information requested about the issu	er er				
Name of Issuer (check if this is an amendment BRG Petroleum Corporation	nt and name has changed, and indicate change.)				
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)			
7134 South Yale Avenue, Suite 600, Tulsa, Oklahoma 74136 Address of Principal Business Operations (Number and Street, City, State, Zip Code) If different from Executive Offices) (918) 496-2626 Telephone Number (I					
Brief Description of Business Oil and gas exploration and development Type of Business Organization		processify): PROCES			
C C	ted partnership, already formed other (g	JAN 26 2			
	Month Year nization: 0 8 0 3	nated THOMSO			
GENERAL INSTRUCTIONS					
Federal:	curities in reliance on an exemption under Regulation D	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.			

which it is due, on the date it was mailed by United States registered or certified mail to that address

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

		A. BASIC IDI	ENTIFICATION DATA		
2. Enter the information re-	quested for the fol	lowing:			
• Each promoter of the	ne issuer, if the iss	suer has been organized w	ithin the past five years;		
 Each beneficial own 	ner having the pow	er to vote or dispose, or dir	ect the vote or disposition	of, 10% or more of	a class of equity securities of the issuer.
 Each executive offi 	cer and director o	f corporate issuers and of	corporate general and man	aging partners of	partnership issuers; and
• Each general and m	anaging partner o	f partnership issuers.			
Charle Day(an) Abad Assalas	[] B	П рб	F. Francisco Office	/d Diseases	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it Burkhart, James L.	individual)				
Business or Residence Addres 7134 South Yale Avenue	•	Street, City, State, Zip Co sa, Oklahoma 74136	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Reid, B. J.	individual)			· · · · · · · · · · · · · · · · · · ·	
Business or Residence Addres	ss (Number and	Street, City, State, Zip Co	ode)		
7134 South Yale Avenue,	Suite 600, Tulsa	a, Oklahoma 74136			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Burkhart, Mike W.	f individual)				
Business or Residence Addres	s (Number and	Street, City, State, Zip Co	ode)		
7134 South Yale Avenue,	Suite 600, Tuls	a, Oklahoma 74136			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	✓ Director	General and/or Managing Partner
Full Name (Last name first, it	f individual)				
Gee, Robert E.					
Business or Residence Addres 7134 South Yale Avenue		Street, City, State, Zip Cosa, Oklahoma 74136	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	✓ Director	General and/or Managing Partner
Full Name (Last name first, it Burkhart, J. Keith	f individual)				
Business or Residence Addres 7134 South Yale Avenue	,	Street, City, State, Zip Cosa, Oklahoma 74136	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, in Williams, Steven J.	f individual)				
Business or Residence Addre 7134 South Yale Avenue	•	Street, City, State, Zip Cosa, Oklahoma 74136	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it Wootton, Clyde F.	f individual)				
Business or Residence Addre 7134 South Yale Avenue		Street, City, State, Zip Cosa, Oklahoma 74136	ode)		
	(Use bla	nk sheet, or copy and use	additional copies of this s	heet, as necessary)

	en di Salamania. La casa di Salamania	A. BASIC ID	ENTIFICATION DATA		
2. Enter the information re	quested for the fo	llowing:			·
 Each promoter of the 	he issuer, if the is	suer has been organized w	vithin the past five years;		
 Each beneficial own 	ner having the pow	er to vote or dispose, or di	rect the vote or disposition	of, 10% or more of	a class of equity securities of the issuer.
 Each executive offi 	icer and director o	f corporate issuers and of	corporate general and man	naging partners of	partnership issuers; and
 Each general and m 	nanaging partner o	f partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it Scott S. Gruns	f individual)				
Business or Residence Addres 7134 South Yale Avenue	•	Street, City, State, Zip Cosa, Oklahoma 74136	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it	findividual)				
Business or Residence Address	ss (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
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Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)	<u> </u>	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
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					В. П	NFORMATI	ION ABOU	T OFFERI	NG				
												Yes	No
1.	Has the	issuer solo	l, or does th									X	
						Appendix,		_				25	000 00
2.	What is	the minim	um investm	ent that w	ill be acce	pted from a	my individ	ual?				\$_25,	00.00
3.	Does the	e offering	permit joint	t ownershi	p of a sing	le unit?				.,,,,,,,,,,		Yes	No
4.											irectly, any		
											he offering. with a state		
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					В. П	NFORMAT	ION ABOU	T OFFERI	NG				
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2.	What is	the minim	ım investm			Appendix		_				a 25.	00.00
۷.	W Hat 15	the minim	mi nivesm	iciii tiiat w	in be acce	pied from a	my marvia	iuaj /				\$_25, Yes	
3.	Does th	e offering p	ermit joint	l ownershi	p of a sing	le unit?			••••			x	N₀ □
4.	Enter th	ie informati	on request	ed for eac	h person v	ho has bee	n or will t	e paid or s	given, dire	ctly or ind	irectly, any		
	If a pers	sion or simi son to be list s, list the na r or dealer,	ed is an ass me of the b	ociated pe roker or de	rson or age aler. If mo	ent of a brok ore than five	ter or deale e (5) persor	r registered as to be list	l with the S ed are asso	EC and/or	with a state		
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

					В. П	VFORMAT	ION ABOU	T OFFERE	NG				
1.	Has the	issuer sold	, or does th	ie issuer ir	ntend to se	ll, to non-a	ccredited i	nvestors in	this offeri	ng?		Yes	No
			,			Appendix,				_		<u> </u>	Ŀ
2.	What is	the minim	um investm					_			***************************************	§_25,	000.00
2	5	٠		, .								Yes	No
3.		e offering p										X	
4.	commis If a pers or state	he informati ssion or simi son to be list s, list the na or or dealer,	lar remuner ed is an ass me of the b	ration for s ociated pe roker or de	olicitation rson or age aler. If mo	of purchase ent of a brok ore than five	ers in conne er or deale e (5) persor	ection with r registered is to be list	sales of sec with the S ed are asso	curities in tl EC and/or	ne offering. with a state		
		Last name to st Securities		vidual)									
Bus	siness or	Residence.	Address (N	umber and	Street, Ci	ity, State, Z	ip Code)					*****	
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Bu	siness o	Residence	Address (N	Number an	d Street, C	City, State, 2	Zip Code)						
Naı	me of As	sociated Br	oker or Dea	ıler									
Sta	tes in W	hich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
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Ful	ll Name	Last name	first, if indi	vidual)	·								
Bu	siness o	r Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)						
Na	me of As	sociated Br	oker or De	aler						· · · · · · · · · · · · · · · · · · ·			
Sta	ites in W	hich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	\$	\$
	Equity	§	\$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify Oll/gas working interests)	14,000,000.00	\$_0.00
	Total	14,000,000.00	\$ 0.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors		\$ 0.00
	Non-accredited Investors		\$ 0.00
	Total (for filings under Rule 504 only)	0	\$_0.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Time of Officia	Type of Security	Dollar Amount Sold
	Type of Offering	•	
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$_3,610.00
	Legal Fees	v	\$_13,000.00
	Accounting Fees	©	\$_5,000.00
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	2	\$ 1,120,000.00
	Other Expenses (identify) Blue sky fees/offering costs	.	§ 280,000.00
	Total	_	\$ 1,421,610.00

	b. Enter the difference between the aggregate offeri and total expenses furnished in response to Part C — o proceeds to the issuer."	Question 4.a. This difference is the "adjusted gros	SS	\$12,578,390.00
	Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate an the payments listed must equal the adjusted gros	d	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		. S 520,000.00	\$
	Purchase of real estate		\$	
	Purchase, rental or leasing and installation of maci	hinery		
	and equipment			
	Construction or leasing of plant buildings and faci	· 🗆 \$	s	
	Acquisition of other businesses (including the value offering that may be used in exchange for the assessuer pursuant to a merger)	□\$	□ \$	
	Repayment of indebtedness		****	_ _
	Working capital			
	Other (specify): Intangible drilling and completion	in costs of drilling oil and gas wells, including		12,058,390.00
	ease costs and other costs of dry holes and acq		. [_] *	2 *
			. 🗆 \$	
	Column Totals		\$ <u>520,000.00</u>	\$_12,058,390.00
	Total Payments Listed (column totals added)		\$_ <u></u> 12	2,578,390.00
		D. FEDERAL SIGNATURE		
signa	ssuer has duly caused this notice to be signed by the ture constitutes an undertaking by the issuer to furniformation furnished by the issuer to any non-accr	undersigned duly authorized person. If this noti	ission, upon writte	
Issue	r (Print or Type)	Signature	Date	
BRO	Petroleum Corporation	131151	January 12, 200	4
Nam	e of Signer (Print or Type)	Title of Signer (Print or Type)		
B. J.	Reid	President, BRG Petroleum Corporation		

- ATTENTION -----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE			_
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No X	

- See Appendix, Column 5, for state response.
- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
BRG Petroleum Corporation	13 ml	January 12, 2004
Name (Print or Type)	Title (Print or Type)	
B. J. Reid	President, BRG Petroleum Corporation	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 1 2 3 5 4 Disqualification Type of security under State ULOE and aggregate Intend to sell (if yes, attach to-non-accredited offering price Type of investor and explanation of investors in State offered in state amount purchased in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited State Yes No Investors Amount Investors Yes No Amount ALΑK AZX × ARCAX × CO X X * CT× X DE DC X X FLGA × Ш X ID × IL* X IN IΑ KS $\mathbf{K}\mathbf{Y}$ LA ME MD X X MA × X MI × X MN X X MS

2 3 1 4 5 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach to-non-accredited offering price Type of investor and explanation of investors in State offered in state amount purchased in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited Investors State Yes No Amount Investors Amount Yes No X MO × MT NE X NVX NH NJ × × NM NY X X NC ND OHX OK X X OR X PA × X RI SCSD TN TX× UT VT X VA X X WA X X WV X WI

APPENDIX

	APPENDIX												
1	Intend to non-a investor	d to sell accredited rs in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		under St (if yes, explan waiver	lification ate ULOE attach ation of granted)							
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No				
WY PR	X		*						×				

^{*} Oil and gas working interests - \$14,000,000